24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Catalist, LLC	07 21 2016
Mailing Address 1090 Vermont Ave NW	Amount
Ste 300	
City State Zip Code	896.98
Washington DC 20005-4966	Transaction ID: VN7A7A1TEH6 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type 001	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: X House District: 07
Pramila Jayapal Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought Disbut 20236.42 Disbut 2016	orsement For:
Full Name of Payee Moxie Media	Date of Public Distribution/Dissemination
Mailian Addusas	07 21 2016
Mailing Address PO Box 30084	Amount
City State Zip Code	9669.72
Seattle WA 98113-2084	Transaction ID : VN7A7A1TEC7 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ 001	M M / D D / Y Y Y Y
Type	
Name of Federal Candidate Support Office	e Sought: X House District: 07
Pramila Jayapal Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought Disbut 20236.42	ursement For:
	Other (specify) P
(a) SUBTOTAL of Itemized Independent Expenditures	10566.70
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Caroline Fines [Electronically Filed] Date 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	